

ENGROSSED HOUSE BILL No. 1132

DIGEST OF HB 1132 (Updated February 18, 2010 10:08 am - DI 73)

Citations Affected: Noncode.

Synopsis: Indiana check-up plan task force. Reestablishes the Indiana check-up plan task force until December 31, 2011. (The introduced version of this bill was prepared by the interim study committee on Medicaid supplemental programs.)

Effective: Upon passage.

Brown C, Crawford

(SENATE SPONSORS — MILLER, SIMPSON, BREAUX)

January 7, 2010, read first time and referred to Committee on Public Health. January 14, 2010, amended, reported — Do Pass. January 20, 2010, read second time, ordered engrossed. Engrossed. January 21, 2010, read third time, passed. Yeas 72, nays 22.

SENATE ACTION

February 1, 2010, read first time and referred to Committee on Health and Provider

Services.
February 11, 2010, reported favorably — Do Pass; reassigned to Committee on Appropriations. February 18, 2010, amended, reported favorably — Do Pass.











Second Regular Session 116th General Assembly (2010)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2009 Regular and Special Sessions of the General Assembly.

ENGROSSED HOUSE BILL No. 1132

A BILL FOR AN ACT concerning Medicaid.

Be it enacted by the General Assembly of the State of Indiana:

1	SECTION 1. [EFFECTIVE UPON PASSAGE] (a) The definitions
2	in IC 12-15-44.2 apply to this SECTION.
3	(b) As used in this SECTION, "task force" refers to the Indiana

- (b) As used in this SECTION, "task force" refers to the Indiana check-up plan task force established by subsection (c).
 - (c) The Indiana check-up plan task force is established to:
 - (1) study, monitor, and provide guidance and make recommendations to the state concerning the Indiana check-up plan;
 - (2) develop methods to increase availability of affordable coverage for health care services for all Indiana residents;
 - (3) develop an education and orientation program for individuals participating in the plan;
 - (4) monitor the impact of new federal health and health insurance laws on the Indiana check-up plan; and
 - (5) make recommendations to the legislative council.
- (d) The affirmative votes of a majority of the voting members appointed to the task force are required for the task force to take action on any measure, including final reports.

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1	(e) The office of Medicaid policy and planning established by
2	IC 12-8-6-1 shall staff the task force.
3	(f) The task force consists of the members appointed to the
4	Indiana check-up plan task force established by P.L.218-2007,
5	SECTION 57, and serving on December 31, 2009. If there is a
6	vacancy on the task force, the appointing authority who appointed
7	the member whose position is vacant shall appoint another
8	member so that the task force consists of the following voting
9	members:
10	(1) Four (4) members described in subsection (g)(1) through
11	(g)(4) appointed by the speaker of the house of
12	representatives, two (2) of whom are appointed based on the
13	recommendation of the minority leader of the house of
14	representatives and none of whom are legislators.
15	(2) Four (4) members described in subsection (g)(5) through
16	(g)(8) appointed by the president pro tempore of the senate,
17	two (2) of whom are appointed based on the recommendation
18	of the minority leader of the senate and none of whom are
19	legislators.
20	(3) Four (4) members described in subsection (g)(9) through
21	(g)(12) appointed by the governor, not more than two (2) of
22	whom are members of the same political party.
23	(g) The members appointed under subsection (f) must represent
24	the following interests:
25	(1) Hospitals.
26	(2) Insurance companies.
27	(3) Primary care providers.
28	(4) Health professionals who are not primary care providers.
29	(5) Minority health concern experts.
30	(6) Business.
31	(7) Organized labor.
32	(8) Consumers.
33	(9) Children's health issues.
34	(10) Adult health issues.
35	(11) Mental health issues.
36	(12) Pharmaceutical industry.
37	(h) The secretary of the office of the secretary of family and
38	social services shall call the first meeting of the task force, at which
39	the members shall elect the chairperson of the task force.
40	(i) The task force shall report findings and make
41	recommendations to the governor and to the legislative council in



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an electronic format under IC 5-14-6 as follows:

	 (1) A report not later than November 1, 2010. (2) A final report not later than November 1, 2011. (j) The task force members are not eligible for per diem imbursement or reimbursement for expenses incurred for travel 	
to	and from task force meetings.	
	(k) This SECTION expires December 31, 2011.	
	SECTION 2. An emergency is declared for this act.	

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COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1132, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, line 9, delete "Interest" and insert "**Beginning July 1, 2011**, interest".

Page 2, line 12, delete "Interest" and insert "Subject to subsection (d)(5), interest".

Page 2, after line 21, begin a new paragraph and insert:

"SECTION 2. [EFFECTIVE UPON PASSAGE] (a) The definitions in IC 12-15-44.2 apply to this SECTION.

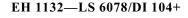
- (b) As used in this SECTION, "task force" refers to the Indiana check-up plan task force established by subsection (c).
 - (c) The Indiana check-up plan task force is established to:
 - (1) study, monitor, and provide guidance and make recommendations to the state concerning the Indiana check-up plan;
 - (2) develop methods to increase availability of affordable coverage for health care services for all Indiana residents;
 - (3) develop an education and orientation program for individuals participating in the plan;
 - (4) monitor the impact of new federal health and health insurance laws on the Indiana check-up plan; and
 - (5) make recommendations to the legislative council.
- (d) The affirmative votes of a majority of the voting members appointed to the task force are required for the task force to take action on any measure, including final reports.
- (e) The office of Medicaid policy and planning established by IC 12-8-6-1 shall staff the task force.
- (f) The task force consists of the members appointed to the Indiana check-up plan task force established by P.L.218-2007, SECTION 57, and serving on December 31, 2009. If there is a vacancy on the task force, the appointing authority who appointed the member whose position is vacant shall appoint another member so that the task force consists of the following voting members:
 - (1) Four (4) members described in subsection (g)(1) through (g)(4) appointed by the speaker of the house of representatives, two (2) of whom are appointed based on the recommendation of the minority leader of the house of representatives and none of whom are legislators.

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- (2) Four (4) members described in subsection (g)(5) through (g)(8) appointed by the president pro tempore of the senate, two (2) of whom are appointed based on the recommendation of the minority leader of the senate and none of whom are legislators.
- (3) Four (4) members described in subsection (g)(9) through (g)(12) appointed by the governor, not more than two (2) of whom are members of the same political party.
- (g) The members appointed under subsection (f) must represent the following interests:
 - (1) Hospitals.
 - (2) Insurance companies.
 - (3) Primary care providers.
 - (4) Health professionals who are not primary care providers.
 - (5) Minority health concern experts.
 - (6) Business.
 - (7) Organized labor.
 - (8) Consumers.
 - (9) Children's health issues.
 - (10) Adult health issues.
 - (11) Mental health issues.
 - (12) Pharmaceutical industry.
- (h) The secretary of the office of the secretary of family and social services shall call the first meeting of the task force, at which the members shall elect the chairperson of the task force.
- (i) The task force shall report findings and make recommendations to the governor and to the legislative council in an electronic format under IC 5-14-6 as follows:
 - (1) A report not later than November 1, 2010.
 - (2) A final report not later than November 1, 2011.
- (j) The task force members are not eligible for per diem reimbursement or reimbursement for expenses incurred for travel to and from task force meetings.
 - (k) This SECTION expires December 31, 2011.

SECTION 3. An emergency is declared for this act.".

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1132 as introduced.)

BROWN C, Chair

Committee Vote: yeas 11, nays 0.

EH 1132-LS 6078/DI 104+



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COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1132, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS and be reassigned to the Senate Committee on Appropriations.

(Reference is made to House Bill 1132 as printed January 15, 2010.)

MILLER, Chairperson

Committee Vote: Yeas 8, Nays 0.

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COMMITTEE REPORT

Madam President: The Senate Committee on Appropriations, to which was referred Engrossed House Bill No. 1132, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Delete the title and insert the following:

A BILL FOR AN ACT concerning Medicaid.

Page 1, delete lines 1 through 17.

Page 2, delete lines 1 through 22.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to EHB 1132 as printed February 12, 2010.)

KENLEY, Chairperson

Committee Vote: Yeas 9, Nays 0.

